PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application

Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	10/750,482	
Confirmation No.	9863	
iling Date	12/31/2003	
First Named Inventor	Jeffrey James Jonas	
Art Unit	2121	

		1100: 1100:			
	A diluse for the	o obovo identified ann	lication		
Please change the Corresp	ondence Address for the	e apove-identified app	moduom		ł
10:		i			1
Customer Number	22462				
	22.0-				
	Type Customer Number	er here			
OR	Type Customer Number	· · · · · · · · · · · · · · · · · · ·			
Firm or					1
Individual Name					
Address	_				
Address				1 710	1
City			State	ZIP)c
			<u> </u>		
Country		Fax			
Telephone This form cannot be used					
I am the:	•				
☐ Applicant/Inventor	•				
Assignee of record Statement under	d of the entire interest. r 37 CFR 3.73(b) is enc	losed. (Form PTO/SB	/96).		
	of record.	•	•	•	
Registered practife executed oath	ioner named in the appl or declaration. See 37 C	lication transmittal lett CFR 1.33(a)(1). Regis	er in an applic tration Numbe	ation withou	ut an
Typed or Printed	40.400				
Name: Christine H. Smith, Re	7.				
Signature	(Doden)				
Date 700, 17, 20	105	in the laterant of	r their represent:	ative(s) are re	equired. Submit
NOTE: Signatures of all the in	ventors or assignees of rec	ora of the entire interest of below*.	H LIGHTOPTOSOTIA		
multiple forms if more than on	orms are submitted.				